

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90268 003 ***150.00

40086447



04252006 Chg-P CR2E034 (11/05)

4. FEI Number **20-2662999** Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MACINTER CORPORATION
5440 N STATE RD 7
STE 218
FT LAUDERDALE, FL 33319

7. Name and Address of New Registered Agent

Name **ARIAS & DE LA CRUZ**
Street Address (P.O. Box Number is Not Acceptable)
7105 SW 8 STREET STE 306
City **MIAMI, FL** Zip Code **33144**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* **FABRICA Arias** **04-20-06**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	GALLEGO, MARIA C	1490 W 49 PLACE - STE 217	HIALEAH, FL 33012	<input type="checkbox"/>
VPD	HENAO, FLOR MARIA	1490 W 49 PLACE - STE 217	HIALEAH, FL 33012	<input type="checkbox"/>
SD	GALLEGO, MARIA I	1490 W 49 PLACE - STE 217	HIALEAH, FL 33012	<input type="checkbox"/>
APD	GALLEGO, CESAR A	1490 W 49 PLACE - STE 217	HIALEAH, FL 33012	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
		5230 HOLLYWOOD BV. STE 202	HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		5230 HOLLYWOOD BV. STE 202	HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		5230 HOLLYWOOD BV. STE 202	HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		5230 HOLLYWOOD BV. STE 202	HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **MARIA C. GALLEGO**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-20-06

Date

305 2263443

Daytime Phone #